



IT25-

## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application No.	10/506,357
		Filing Date	August 31, 2004
		First Named Inventor	Jason Brett Harrop
		Art Unit	2178
		Examiner Name	Stork, Kyle R
Total Number of Pages in This Submission	22	Attorney Docket Number	17480P029

### ENCLOSURES (check all that apply)

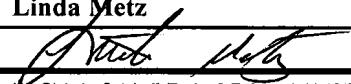
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached  <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> PTO/SB/08  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA  <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; height: 40px; width: 100%;">return postcard</div>
<div style="border: 1px solid black; height: 20px; width: 100%;">Remarks</div>		

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Eric S. Hyman, Reg. No. 30,139 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	
Date	10/16/07

### CERTIFICATE OF MAILING/TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Typed or printed name	Linda Metz	
Signature		Date 10/16/07

Based on PTO/SB/21 (10-07) as modified by Blakely, Sokoloff, Taylor & Zafman (wlr) 10/05/2007.  
SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450



# FEET TRANSMITTAL for FY 2007

Patent fees are subject to annual revision.

Complete if Known

Application Number	10/506,357
Filing Date	August 31, 2004
First Named Inventor	Jason Brett Harrop
Examiner Name	Stork, Kyle R
Art Unit	2178
Attorney Docket No.	17480P029

Applicant claims small entity status. See 37 CFR 1.27.

**TOTAL AMOUNT OF PAYMENT** (\$)

0.00

## METHOD OF PAYMENT (check all that apply)

Check  Credit card  Money Order  None  Other (please identify): \_\_\_\_\_

Deposit Account Deposit Account Number: \_\_\_\_\_ Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below

Credit any overpayments

Charge fee(s) indicated below, except for the filing fee

Any concurrent or future reply that requires a petition for extension of time should be treated as incorporating an appropriate petition for extension of time and all required fees should be charged.

Charge any additional fee(s) or underpayment of fee(s) during the pendency of this application.

## FEE CALCULATION

### 1. EXTRA CLAIM FEES

		Extra Claims		Fee from below		Fee Paid
Total Claims	89	89*	=	0	X	\$0.00
Independent Claims	6	7	=	0	X	\$0.00
Multiple Dependent					=	

Large Entity	Small Entity			
Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
1202	50	2202	25	Claims in excess of 20
1201	210	2201	105	Independent claims in excess of 3
1203	370	2203	185	Multiple Dependent claim, if not paid
1204	810	2204	405	**Reissue independent claims over original patent
1205	810	2205	405	**Reissue claims in excess of 20 and over original patent
SUBTOTAL (1)		(\$)		0.00

\*or number previously paid, if greater. For Reissues, see below

### 2. ADDITIONAL FEES

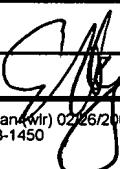
Large Entity      Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description		
1051	130	2051	65	Surcharge - late filing fee or oath		
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet		
2053	130	2053	130	Non-English specification		
1251	120	2251	60	Extension for reply within first month		
1252	480	2252	230	Extension for reply within second month		
1253	1,050	2253	525	Extension for reply within third month		
1254	1,640	2254	820	Extension for reply within fourth month		
1255	2,230	2255	1,115	Extension for reply within fifth month		
1401	510	2401	255	Notice of Appeal		
1402	510	2402	255	Filing a brief in support of an appeal		
1403	1,030	2403	515	Request for oral hearing		
1451	1,510	2451	1,510	Petition to institute a public use proceeding		
1460	130	2460	130	Petitions to the Commissioner		
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)		
1806	180	1806	180	Submission of Information Disclosure Stmt		
1809	810	1809	405	Filing a submission after final rejection (37 CFR § 1.129(a))		
1810	810	2810	405	For each additional invention to be examined (37 CFR § 1.129(b))		
Other fee (specify)		SUBTOTAL (2)		(\$)		

Fee Paid

## SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	Eric S. Hyman	Registration No. (Attorney/Agent)	30,139	Telephone	(310) 207-3800
Signature				Date	10/6/07



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Jason Brett Harrop et al.,

Application No.: 10/506,357

Filing Date: 04/15/2005

For: **A DOCUMENT ASSEMBLY SYSTEM**

)  
)  
) Examiner: Stork, Kyle R  
)  
) Art Unit: 2178  
)  
) Confirmation No: 1087  
)  
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Mail Stop - AMENDMENTS  
Commissioner for Patents  
PO Box 1450  
Alexandria, Virginia 22313-1450

**RESPONSE TO RESTRICTION REQUIREMENT**

Dear Commissioner:

In response to the outstanding Office Action, mailed September 17, 2007, Applicant elects, with traverse,

Invention I. Claims 90-154, drawn to a document generation system including a generation component, classified in class 715, subclass 513, with traverse.

Claims 155-178 are withdrawn.